Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF OKLAHOMA	MMA 41.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	□Chapter 11	
	□Chapter 12	
	□Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	MICHAEL First name	SANDRA First name
	picture identification (for example, your driver's	K	K
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	SPENCER Last name and Suffix (Sr., Jr., II, III)	SPENCER Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of		
	your Social Security number or federal Individual Taxpayer	xxx-xx-5097	xxx-xx-4278
	Identification number (ITIN)		

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■I have not used any business name or EINs.	■I have not used any business name or EINs.
Include trade names and doing business as names	Business name(s)	Business name(s)
	EINs	EINs
Where you live	RR 2, BOX 118-1	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Seguovah	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS Where you live RR 2, BOX 118-1 Vian, OK 74962 Number, Street, City, State & ZIP Code Sequoyah County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

	btor 1 btor 2	MICHAEL K SPEN					Case number (if known)		
Pa	rt 2:	Tell the Court About	Your Ba	ankruptcy C	ase				
7. The chapter of the Bankruptcy Code you as		ruptcy Code you are	Check (Form	one. (For a 2010)). Also	brief description o	f each, see <i>Notice Required by</i> page 1 and check the appropria	y 11 U.S.C. § 342(b) for Individuals I	Filing for Bankruptcy	
	choc	sing to file under	■ Ch	apter 7					
			□Chapter 11						
			□Cha	apter 12					
			□Cha	apter 13					
8.	8. How you will pay the fee			about how ye	ou may pay. Typic r attorney is submi	ally, if you are paying the fee y	ck with the clerk's office in your loca rourself, you may pay with cash, cas half, your attorney may pay with a cr	hier's check, or money	
						Iments. If you choose this opt Official Form 103A).	ion, sign and attach the Application	for Individuals to Pay	
				I request the but is not rec that applies	at my fee be waiv quired to, waive yo to your family size	ed (You may request this option or fee, and may do so only if y and you are unable to pay the	on only if you are filing for Chapter 7 our income is less than 150% of the fee in installments). If you choose the (Official Form 103B) and file it with y	official poverty line his option, you must fill	
9.	bank	you filed for ruptcy within the years?	■No.						
		•		District		When	Case number		
				District		When	Case number		
				District		When	Case number		
10.	cases	ny bankruptcy s pending or being	■No					WATER AND THE STREET STREET, STREET STREET, ST	
	not fi you, e	by a spouse who is ling this case with or by a business er, or by an te?	ĽYes.						
				Debtor			Relationship to you		
				District		When	Case number, if know	1	
				Debtor			Relationship to you		
				District	Water Control of the	When	Case number, if know	1	
11.		u rent your ence?	■No.	Go to I	ine 12.				
	reside	Jilog :	□Yes.	Has yo	ur landlord obtaine	ed an eviction judgment agains	st you and do you want to stay in you	ur residence?	
					No. Go to line 12.				
					Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this	

Debtor Debtor				Case number (if known)
Part 3:	Report About Any Bu	sinesses	You Ow	n as a Sole Proprietor
of	re you a sole proprietor f any full- or part-time usiness?	■No.	Go to	Part 4.
		□Yes.	Name	e and location of business
bu ar se as	sole proprietorship is a usiness you operate as n individual, and is not a eparate legal entity such is a corporation,		Namo	e of business, if any
lf so se	artnership, or LLC. you have more than one ple proprietorship, use a eparate sheet and attach		Numi	per, Street, City, State & ZIP Code
it t	to this petition.			k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
Cł Ba yo	re you filing under hapter 11 of the ankruptcy Code and are ou a <i>small business</i> ebtor?	deadline operatio	s. If you in	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement or low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).
E.	or a definition of <i>small</i>	No.	l am	not filing under Chapter 11.
bu	usiness debtor, see 11 S.C. § 101(51D).	□No.	I am t Code	illing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		□Yes.	l am t	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code
Part 4:	Report if You Own or	Have An	y Hazardo	ous Property or Any Property That Needs Immediate Attention
pro all of ide	o you own or have any operty that poses or is leged to pose a threat imminent and entifiable hazard to ablic health or safety?	■No. □Yes.	What is	the hazard?

Number, Street, City, State & Zip Code

If immediate attention is

Where is the property?

needed, why is it needed?

Or do you own any

property that needs

immediate attention? For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a Incapacity. mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

I have a mental illness or a mental Incapacity.

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

I am currently on active military duty Active duty. in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pai	t 6: Answer These Quest	ions for F	Reporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily co	onsumer debts? Consumer debts onal, family, or household purpose	are defined in 11 U.S.C. § 101(8) as "incurred by an					
			□No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			□No. Go to line 16c.							
			☐Yes. Go to line 17.							
		16c.	State the type of debts you o	we that are not consumer debts or	business debts					
17.	Are you filing under Chapter 7?	□No.	I am not filing under Chapter	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter 7. E expenses are paid that funds	Oo you estimate that after any exer will be available to distribute to un	mpt property is excluded and administrative asecured creditors?					
	administrative expenses		No							
	are paid that funds will be available for distribution to unsecured creditors?		∐Yes							
18.	How many Creditors do	1-49		□h,000-5,000	□25,001-50,000					
	you estimate that you owe?	□50-99		□ 5001-10,000	5 0,001-100,000					
		□100-19 □200-99		□10,001-25,000	☐More than100,000					
19.	How much do you estimate your assets to	□\$0 - \$5	0,000 1 - \$100,000	□\$1,000,001 - \$10 million □\$10,000,001 - \$50 million	□\$500,000,001 - \$1 billion □\$1,000,000,001 - \$10 billion					
	be worth?		01 - \$500,000	□\$50,000,001 - \$30 million						
			01 - \$1 million	□\$100,000,001 - \$500 millio						
20.	How much do you	□\$0 - \$5		□\$1,000,001 - \$10 million	□\$500,000,001 - \$1 billion					
	estimate your liabilities to be?		01 - \$100,000	□\$10,000,001 - \$50 million						
			01 - \$500,000 01 - \$1 million	□\$50,000,001 - \$100 millior □\$100,000,001 - \$500 millio						
Part	7: Sign Below				Access to the second se					
For	you	I have ex	amined this petition, and I dec	are under penalty of perjury that th	ne information provided is true and correct.					
					eligible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.					
document, I have obtaine		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
		relief in accordance with the cl	napter of title 11, United States Co	de, specified in this petition.						
			cy case can result in fines up to		money or property by fraud in connection with a to to 20 years, or both. 18 U.S.C. §§ 152, 1341,					
		/s/ MICH	IAEL K SPENCER		RA K SPENCER					
			EL K SPENCER of Debtor 1	SANDRA I Signature of	K SPENCER f Debtor 2					
		Executed	on December 3, 2015 MM / DD / YYYY	Executed or	December 3, 2015 MM / DD / YYYY					

Debtor 1 MICHAEL K SPEI SANDRA K SPEN				
or your attorney, if you are epresented by one		States Code, and have e	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §	
f you are not represented by in attorney, you do not need to file this page.		oplies, certify that I have r	no knowledge after an inquiry that the information	
	/s/ Justin Stout	Date	December 3, 2015	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Justin Stout Printed name			
	Wright, Stout & Wilburn, PLLC			
	300 West Broadway Muskogee, OK 74401 Number, Street, City, State & ZIP Code			

Email address

Justin@wswlaw.com

Contact phone (918) 682-0091

19581 Bar number & State

Fil	II in this information to identify your case:			
De	ebtor 1 MICHAEL K SPENCER			
De	First Name Middle Name Last Name ebtor 2 SANDRA K SPENCER			
	pouse if, filing) First Name Middle Name Last Name			
Un	nited States Bankruptcy Court for the: EASTERN DISTRICT OF OKLAHOMA			
	ase numberknown)			if this is an ed filing
		- 		٠
Ot	fficial Form 106Sum			
	ummary of Your Assets and Liabilities and Certain Statistical Inform			2/15
nfc	as complete and accurate as possible. If two married people are filing together, both are equally respondation. Fill out all of your schedules first; then complete the information on this form. If you are filing or original forms, you must fill out a new Summary and check the box at the top of this page.	onsible fo ng amend	r supplyin ed schedu	g correct les after you file
Pa	art 1: Summarize Your Assets			
			Your as Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	150,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	36,250.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	186,250.00
Pai	rt 2: Summarize Your Liabilities			
			Your lia	bilities
			Amount	you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Sche	edule D	\$	176,086.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	39,622.00
	Your total li	iabilities	\$	215,708.00
Par	rt 3: Summarize Your Income and Expenses	****		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,695.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,657.00
Par	Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the cou	urt with you	ır other sch	edules.
7.	Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual prin household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	marily for a	personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. On the court with your other schedules.	Check this	box and su	bmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Document

Best Case Bankruptcy

	ormation to identify your case and	this filing:		
Debtor 1	MICHAEL K SPENCER			
Debtor 2	First Name Mide SANDRA K SPENCER	dle Name Last Name		
Spouse, if filing)		die Name Last Name		
Inited States E	Bankruptcy Court for the: EASTER	N DISTRICT OF OKLAHOMA		
ase number				☐ Check if this is a
				amended filing
fficial F	orm 106A/B			
chedu	le A/B: Property			12/15
each category,	separately list and describe items. List	an asset only once. If an asset fits in more than one wood married people are filing together, both are equally	category, list the asset i	in the category where you th
re space is nee	eded, attach a separate sheet to this for	m. On the top of any additional pages, write your nam	y responsible for supply le and case number (if l	ying correct information. If known). Answer every quest
nt 1: Describe	e Each Residence, Building, Land, or O	ther Real Estate You Own or Have an Interest In		
Do you own or	have any local or equitable interest in	any residence building land or similar accorde.		
DO YOU OWN OF	nave any legal or equitable interest in a	any residence, building, land, or similar property?		
□No. Go to Par	t 2.			
18	·			
Yes. vvnere i	is the property?			
■Yes. vvnere i	is the property?			
■Yes. vvnere i	is the property?			
		What is the property? Check all that apply.		
RESIDEN	ICE on 18 acres	What is the property? Check all that apply. ■ Single-family home	Do not deduct secure	d claims or exemptions. Put the
RESIDEN			amount of any secure	d claims or exemptions. Put th d claims on <i>Schedule D:</i> Claims Secured by Property.
RESIDEN	ICE on 18 acres	Single-family home	amount of any secure	d claims on Schedule D:
RESIDEN	ICE on 18 acres	Single-family home Duplex or multi-unit building	amount of any secure	d claims on Schedule D:
RESIDEN Street address	ICE on 18 acres s, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	amount of any secure Creditors Who Have C Current value of the entire property?	d claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
RESIDEN	ICE on 18 acres	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	amount of any secure Creditors Who Have (d claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
RESIDEN Street address	ICE on 18 acres s, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	amount of any secure Creditors Who Have Courrent value of the entire property? \$150,000.0	d claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$150,000.0
RESIDEN Street address	ICE on 18 acres s, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property? \$150,000.0 Describe the nature (such as fee simple,	Current value of the portion you own? 0 \$150,000.0 of your ownership interest tenancy by the entireties, or
RESIDEN Street address	ICE on 18 acres s, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	current value of the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know	Current value of the portion you own? 0 \$150,000.0 of your ownership interest tenancy by the entireties, or
RESIDEN Street address	JCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only	Current value of the entire property? \$150,000.0 Describe the nature (such as fee simple,	Current value of the portion you own? 0 \$150,000.0 of your ownership interest tenancy by the entireties, or
RESIDEN Street address	ICE on 18 acres s, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	amount of any secure Creditors Who Have Courrent value of the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS	d claims on Schedule D: Claims Secured by Property. Current value of the portion you own? 0 \$150,000.0 of your ownership interest tenancy by the entireties, orn.
RESIDEN Street address City	JCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	amount of any secure Creditors Who Have Courrent value of the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS	community property
RESIDEN Street address City	JCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	amount of any secure Creditors Who Have Compared to the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS	Claims Secured by Property. Current value of the portion you own? 0 \$150,000.0 of your ownership interest tenancy by the entireties, or n.
RESIDEN Street address City	JCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	amount of any secure Creditors Who Have Compared to the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS	community property
Street address City SEQUOY	JCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	amount of any secure Creditors Who Have Comment value of the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS	community property
RESIDEN Street address City SEQUOY	NCE on 18 acres s, if available, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	amount of any secure Creditors Who Have Courrent value of the entire property? \$150,000.0 Describe the nature (such as fee simple, a life estate), if know JTWROS Check if this is constructions in, such as local	community property

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

Document

instructions)

Best Case Bankruptcy

\$500.00

\$500.00

Deb Deb		MICHAEL K SANDRA K		······································	Case number (if known)	
5 A .p	dd the ages y	dollar value o ou have attach	f the portion you own for all of y ned for Part 2. Write that number	our entries from Part 2, includinç here	g any entries for =>	\$15,200.00
Part :	Des	scribe Your Perso	onal and Household Items			
			legal or equitable interest in any	of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	x <i>ample</i> No		furnishings nces, furniture, linens, china, kitche	enware -		ciains of exemptions.
	Yes. I	Describe	household goods			\$2,500.00
E	No	s: Televisions a	and radios; audio, video, stereo, an I phones, cameras, media players,	d digital equipment; computers, pri games	inters, scanners; music co	ollections; electronic devices
E)	k <i>ample</i> No	oles of value es: Antiques and other collecti	I figurines; paintings, prints, or othe ions, memorabilia, collectibles	er artwork; books, pictures, or other	art objects; stamp, coin,	or baseball card collections;
E)	kample No	ent for sports a s: Sports, photo musical instri escribe	ographic, exercise, and other hobby	v equipment; bicycles, pool tables,	golf clubs, skis; canoes a	nd kayaks; carpentry tools;
	No	-	s, shotguns, ammunition, and relat	ed equipment		
			muzzle loader			\$500.00
	vio		othes, furs, leather coats, designer	wear, shoes, accessories		\$250.00
	xampl No	es: Everyday jev escribe	welry, costume jewelry, engageme	nt rings, wedding rings, heirloom je	ewelry, watches, gems, go	old, silver \$500.00
			trouding inigo			φυσ.σσ
E	xample No	m animals es: Dogs, cats, l	birds, horses			
	No	er personal and	d household items you did not a	ready list, including any health a	aids you did not list	

Official Form 106A/B

Schedule A/B: Property

page 3

	ebtor 1 ebtor 2	MICHAEL K SPENCER SANDRA K SPENCER	Case number (if known)	
15	i. Add the for Pa	ne dollar value of all of your entries f rt 3. Write that number here	rom Part 3, including any entries for pages you have attached	\$3,750.00
Pa	rt 4: Des	cribe Your Financial Assets		
Do	you ow	n or have any legal or equitable inter	rest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	les: Money you have in your wallet, in y	our home, in a safe deposit box, and on hand when you file your petil	ion
		es of money les: Checking, savings, or other financia institutions. If you have multiple acc	al accounts; certificates of deposit; shares in credit unions, brokerage counts with the same institution, list each.	houses, and other similar
			Institution name:	
		17.1.	checking acct - Armstrong	\$400.00
			vith brokerage firms, money market accounts	
	and join	blicly traded stock and interests in in nt venture	ncorporated and unincorporated businesses, including an interes	st in an LLC, partnership,
	™ No ⊡Yes. G	ive specific information about them Name of entity:	% of ownership:	
	Negotia Non-neg ■No	ble instruments include personal check gotiable instruments are those you canr	negotiable and non-negotiable instruments s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
	_lYes. Gi	ve specific information about them Issuer name:		
l	<i>Example</i> □No		1(k), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	Yes. Lis	st each account separately. Type of account: retirement acct	Institution name: OPERS acct	\$14,400.00
	Your sha	deposits and prepayments are of all unused deposits you have ma as: Agreements with landlords, prepaid	ide so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications compa	nies, or others
_	■No □Yes		Institution name or individual:	
	Annuitie	s (A contract for a periodic payment of	money to you, either for life or for a number of years)	
	⊒Yes	Issuer name and descripti	on.	
- 2		in an education IRA, in an account in §§ 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or under a qualified state tuition pro	ogram.
		4004/5		

Official Form 106A/B Schedule A/B: Property page 4

	ebtor :				PENCER ENCER				Case number (if known)	
	□Yes	s		Instit	tution name a	and description.	Separately file the i	records of any inte	erests.11 U.S.C. § 521(c):	
25	No)			re interests i		her than anything l	isted in line 1), a	and rights or powers exerc	isable for your benefit
26	Exa ■No	ampl	es: Intern	et domai	n names, wel	bsites, proceed	d other intellectual is from royalties and		nents	
			·		ation about ti					•
27	Exa No	mpl	es: Buildi	ng permit	ts, exclusive l		s erative association h	oldings, liquor lice	enses, professional licenses	
			•		ation about th	nem				
M	oney o	or p	roperty o	owed to y	ou?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ■No		nds owe	d to you						
			ve specifi	c informa	ation about th	em, including w	vhether you already	filed the returns a	and the tax years	
29	Exa No	mple		lue or lun c informa		ny, spousal sup	pport, child support,	maintenance, div	vorce settlement, property se	ettlement
30.	Exai	mple	es: Unpaid benefi	d wages, its; unpai	d loans you n	urance paymen nade to someor	nts, disability benefits ne else	s, sick pay, vacati	ion pay, workers' compensa	ation, Social Security
21				ic informa						
31.						rance; health sa	avings account (HSA	A); credit, homeov	wner's, or renter's insurance	•
	∐Yes.	. Na	me the in	surance	company of e Company r	each policy and name:	list its value.	Benefici	ary:	Surrender or refund value:
	If you some	u are eone	e the ben e has died	eficiary o d.	f a living trus	u from someo t, expect procee	ne who has died eds from a life insura	ance policy, or are	e currently entitled to receive	e property because
	∐Yes.	. Gi	ve specifi	c informa	ation					
33.							ve filed a lawsuit or claims, or rights to		d for payment	
	□Yes.	. De	scribe ea	ich claim						
	No			and unli		iims of every n	nature, including co	ounterclaims of	the debtor and rights to se	et off claims
					lid not alrea	dv list				
	No					.,				
	∟Yes.	. Giv	e specifi	c informa	ition					

Schedule A/B: Property page 5 Software Copyright (c) 1996-2015 Best Case, LLC - www.bestcase.com Case 15-81316 Doc 1 Filed 12/07/15 Entered 12/07/15 11:33:57 Desc Main Document Page 14 of 60

Official Form 106A/B

	otor 1	MICHAEL K SPI				
Del	otor 2	SANDRA K SPE	NCER		Case number (if known)	1
36.			II of your entries from Part 4, incl hber here			\$14,800.00
Part	5; Des	scribe Any Business-R	elated Property You Own or Have an I	nterest In. List any real estat	e in Part 1.	
37. [ο νου ο	wn or have any legal o	r equitable interest in any business-re	lated property?		
	No. Go t		•			
	res. Go	to line 38.				
Part	6: Des	scribe Any Farm- and (ou own or have an intere	Commercial Fishing-Related Property set in farmland, list it in Part 1.	You Own or Have an Interest	t In.	
16.	Do you	own or have any le	gal or equitable interest in any fa	arm- or commercial fishi	ng-related property?	
	-	io to Part 7.				
	□Yes. (Go to line 47.				
						Current value of the
						Current value of the portion you own? Do not deduct secured claims or exemptions.
Part	7: Des	cribe All Property You	Own or Have an Interest in That You	Did Not List Above		
2 1	Da wan	have other areas		1:-40		
			y of any kind you did not already country club membership	nstr		
	Nο					
	Yes. G	ive specific informat				
			hand tools, table saws, chai etc	n saws, generator, co	mpressor, air guns,	\$2,500.00
			MANAGEMENT OF THE STATE OF THE	· · · · · · · · · · · · · · · · · · ·		PARTICIPATION DE PARTICIPATION DE LA CONTRACTION
54.	Add th	ne dollar value of al	of your entries from Part 7. Writ	e that number here	Г	\$2,500.00
			•		L	
Part	8: List	the Totals of Each Par	t of this Form			
55.	Part 1:	: Total real estate. Ii	ne 2			\$150,000.00
		Total vehicles, line		\$15,200.00	•••••••••••••	Ψ130,000.00
57.	Part 3:	Total personal and	household items, line 15	\$3,750.00		
		Total financial ass		\$14,800.00		
59.	Part 5:	Total business-rel	ated property, line 45	\$0.00		
60.	Part 6	Total farm- and fis	hing-related property, line 52	\$0.00		
			ty not listed, line 54	+ \$2,500.00		
62.	Total p	personal property.	Add lines 56 through 61	\$36,250.00	Copy personal property tot	al \$36,250.00
	•	• •	-			

Official Form 106A/B

Schedule A/B: Property

\$186,250.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Fill in this infor	mation to identify your	case:		
Debtor 1	MICHAEL K SPEI	NCER		
	First Name	Middle Name	Last Name	
Debtor 2	SANDRA K SPEN	CER		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF OKLAHOMA	MANAGAMAN.
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are y	ou claiming?	Check one only.	even if your spouse	e is filina with you
	Trinoil oct of exciliptions are y	ou ciamining:	CHECK OHE CHIV.	GVGII II VUUI SDUUS	s io illilia villi v

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	you own e value from Check only one box for each exemption.		Specific laws that allow exemption
RESIDENCE on 18 acres SEQUOYAH COUNTY County Line from Schedule A/B: 1.1	\$150,000.00		100% of fair market value, up to	Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla. Stat. tit. 31, § 2
			any applicable statutory limit	
2001 Dodge 3500 pickup Line from Schedule A/B: 3.1	\$200.00		\$0.00	Okla. Stat. tit. 31, § 1(A)(13)
and norm conceane / to. Cit			100% of fair market value, up to any applicable statutory limit	
2002 Chevrolet 1500 pickup Line from Schedule A/B: 3.2	\$2,000.00		\$0.00	Okla. Stat. tit. 31, § 1(A)(13)
Line Horn Genedule AVD. 3.2			100% of fair market value, up to any applicable statutory limit	
2002 Toyota Sequoyah not running, needs radiator	\$2,500.00		\$0.00	Okla. Stat. tit. 31, § 1(A)(13)
Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
1996 John Deere 1070 tractor Line from Schedule A/B: 3.4	\$10,000.00		\$0.00	Okla. Stat. tit. 31, § 1(A)(5)
LINE HOLLI SCHEOUIE AVD. 3.4			100% of fair market value, up to any applicable statutory limit	

Best Case Bankruptcy

MICHAEL K SPENCER Debtor 1 Debtor 2 **SANDRA K SPENCER** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2005 Carry-On cargo/box trailer Okla. Stat. tit. 31, § 1(A)(5) \$500.00 Line from Schedule A/B: 4.1 100% of fair market value, up to any applicable statutory limit household goods Okla. Stat. tit. 31, § 1(A)(3) \$2,500.00 \$2,500.00 Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit muzzle loader Okla. Stat. tit. 31, § 1(A)(14) \$500.00 \$500.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit clothing Okla. Stat. tit. 31, § 1(A)(7) \$250.00 \$250.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit wedding rings Okla. Stat. tit. 31, § 1(A)(8) \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit checking acct - Armstrong Okla. Stat. tit. 12, § 1171.1; \$400.00 \$400.00 Line from Schedule A/B: 17.1 Okla. Stat. tit. 31, § 1(A)(18) 100% of fair market value, up to any applicable statutory limit retirement acct: OPERS acct Okla. Stat. tit. 31, § 1(A)(20) \$14,400.00 \$14,400.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit hand tools, table saws, chain saws, Okla. Stat. tit. 31, § 1(A)(5) \$2,500.00 \$2,500.00 generator, compressor, air guns, etc

ustment.)
s case?

3.

Line from Schedule A/B: 53.1

Best Case Bankruptcy

Desc Main

100% of fair market value, up to any applicable statutory limit

r::: 41: 1 6 0						
Fill in this information	on to identity you	ir case:				
	IICHAEL K SPI					
	rst Name	Middle Name Last Name				
ŧ	ANDRA K SPE	Middle Name Last Name	water the same to			
United States Bankrup	otcy Court for the:	EASTERN DISTRICT OF OKLAHOMA				
Case number						
(if known)				☐ Check	if this is an	
					led filing	
Official Form 10	<u> </u>					
Schedule D:	Creditors	Who Have Claims Secure	ed by Property	/	12/15	
Be as complete and accu needed, copy the Addition known).	rate as possible. If nal Page, fill it out,	two married people are filing together, both are enumber the entries, and attach it to this form. On	qually responsible for supp the top of any additional pa	olying correct information ages, write your name an	n. If more space is nd case number (if	
1. Do any creditors have	•	• • • •				
		is form to the court with your other schedules.	You have nothing else to	report on this form.		
Yes. Fill in all of	the information b	elow.				
Part 1: List All Sec	ured Claims					
2. List all secured claims	s. If a creditor has m	ore than one secured claim. list the creditor separatel	v for	Column B	Column C	
each claim. If more than o	one creditor has a pa	articular claim, list the other creditors in Part 2. As mu	ch Amount of claim	Value of collateral	Unsecured	
as possible, list the claims	in alphabetical orde	er according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Armstrong Ba	nk	Describe the property that secures the claim:	\$20,000.00	\$200.00	\$19,800.00	
Creditor's Name		2001 Dodge 3500 pickup				
4444 W. Dunna	1	As of the date you file, the claim is: Check all that				
1111 W. Broad Muskogee, Ok		apply.				
Number, Street, City, S		LContingent				
Number, Street, Oity, S	state & Zip Code	□Unliquidated □Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or se	cured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 of	only	Estatutory lien (such as tax lien, mechanic's lien)				
☐At least one of the debto	ors and another	☐Judgment lien from a lawsuit				
Check if this claim rela	ates to a	Dther (including a right to offset)				
community debt						
Date debt was incurred	08/06/2015	Last 4 digits of account number				
	_					
2.2 Armstrong Bar Creditor's Name	nk	Describe the property that secures the claim:	\$20,000.00	\$2,000.00	\$18,000.00	
Creditor's Name		2002 Chevrolet 1500 pickup				
1111 W. Broad	lway	As of the date you file, the claim is: Check all that apply.				
Muskogee, OK		Econtingent				
Number, Street, City, S	tate & Zip Code	□Inliquidated				
		Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or sec	cured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 o		Estatutory lien (such as tax lien, mechanic's lien)				
At least one of the debto Check if this claim rela		□Judgment lien from a lawsuit □Dther (including a right to offset)				
community debt	ites to d	Library (including a fight to onset)				
•		the state of the s				
Date debt was incurred	***************************************	Last 4 digits of account number				
2.3 Armstrong Bar	nk	Describe the property that secures the claim:	\$20,000.00	\$10,000.00	\$10,000.00	
				4 1		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debtor 1 MICHAEL K SPENCER		Case number (if know)		
First Name Middle	Name Last Name			
Debtor 2 SANDRA K SPENCER First Name Middle	Name Last Name			
riist name wildule	Name Last Name			
Creditor's Name	1996 John Deere 1070 tractor			
4444 M. Drandway	As of the date you file, the claim is: Check all that			
1111 W. Broadway Muskogee, OK 74403	apply.			
Number, Street, City, State & Zip Code	Contingent Unliquidated			
, , , , , , , , , , , , , , , , , , ,	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
■Debtor 1 and Debtor 2 only	Estatutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Dudgment lien from a lawsuit			
Check if this claim relates to a community debt	Dther (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Dute dest was invaried	Last 4 digits of account number			· · · · · · · · · · · · · · · · · · ·
2.4 Armstrong Bank	Describe the property that secures the claim:	\$20,000.00	\$2,500.00	\$17,500.00
Creditor's Name	2002 Toyota Sequoyah			
	not running, needs radiator			
1111 W. Broadway	As of the date you file, the claim is: Check all that			
Muskogee, OK 74403	apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	□ bisputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec car loan)	ured		
Debtor 2 only ■Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Usudgment lien from a lawsuit			
Check if this claim relates to a	Dther (including a right to offset)			
community debt		THE DESCRIPTION OF THE PROPERTY OF THE PROPERT		
Date debt was incurred	Last 4 digits of account number			
O.S. Chana Hama Martina	Danith die annual de de la late	A445000	A450 000 00	40.00
2.5 Chase Home Mortgage Creditor's Name	Describe the property that secures the claim: RESIDENCE on 18 acres	\$44,158.00	\$150,000.00	\$0.00
	SEQUOYAH COUNTY County			
PO Box 24696	As of the date you file, the claim is: Check all that apply.			
Columbus, OH 43224	Contingent			
Number, Street, City, State & Zip Code	□nliquidated			
Who owes the debt? Check one.	☐Disputed Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec	urad		
Debtor 2 only	car loan)	ureu		
Debtor 1 and Debtor 2 only	Listatutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Dther (including a right to offset)			
Date debt was incurred 01/2004	Last 4 digits of account number 4651			
2.6 DiTech Financial LLC	Describe the property that secures the claim:	\$51,928.00	\$150,000.00	\$0.00

\$150,000.00 \$0.00

Debtor 1	MICHAEL	K SPENCER				Case number (if know)
	First Name	Middle	Name	Last Name		
Debtor 2	SANDRA	K SPENCER				
	First Name	Middle	Name	Last Name	The Control of the Co	
Credit	tor's Name	314	DESIDE	NCE on 18 acres		7
			SEQUU	YAH COUNTY Co	unty	
345	Saint Pete	er St		date you file, the claim	is: Check all that	」
	nt Paul, MN		apply.			
			Conting			
Numb	er, Street, City, S	state & Zip Code	Unliquid			
1877			Dispute			
	s the debt? C	neck one.	Nature of	f lien. Check all that app	oly.	
Debtor 1	•			ement you made (such a	as mortgage or s	secured
Debtor 2	only		car lo	an)		
Debtor 1	and Debtor 2	only	☐Statutor	y lien (such as tax lien, m	nechanic's lien)	
□At least o	ne of the debto	ors and another	□Judgme	nt lien from a lawsuit		
	this claim rela	ites to a	Dther (ir	ncluding a right to offset)		
commu	unity debt					
Date debt v	was incurred	2007	Las	st 4 digits of account nu	umber	-
				this page. Write that nu		\$176,086.00
	he last page o t number here		the dollar va	lue totals from all page	es.	\$176,086.00
Part 2:	ist Others t	o Be Notified f	or a Debt T	hat You Already List	ted	
to collect fr creditor for do not fill o	rom you for a	debt you owe to s bts that you liste his page.	someone els	e, list the creditor in Pa	irt 1, and then l	u already listed in Part 1. For example, if a collection agency is trying ist the collection agency here. Similarly, if you have more than one do not have additional persons to be notified for any debts in Part 1,
-NC	ONE-				On which	line in Part 1 did you enter the creditor?
					Last 4 digi	its of account number

Fill in	this informa	tion to identify your	case:						
Debto	20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	MICHAEL K SPEN	2.4 575 John Frankrich 2.		resign where it is the right of the				
	,	First Name		e Name	Last Name				
Debto	r 2 e if, filing)	SANDRA K SPEN		e Name	l and Name				
					Last Name				
United	d States Bank	ruptcy Court for the:	EASTER	N DISTRICT OF OKL	_AHOMA				
Case	number								•
(if know	n)							heck if this	
	w						ar	mended fili	ing
Offic	ial Form	106E/F							
Sch	edule E/	F: Creditors	Who H	lave Unsecu	red Cl	aims			12/15
any exe Schedu D: Cred the Con	cutory contractle G: Executory litors Who Have stinuation Page (if known).	ts or unexpired leases t Contracts and Unexpire Claims Secured by Pro	hat could re- red Leases (operty. If mo e no informa	sult in a claim. Also lis Official Form 106G). Do re space is needed, co ation to report in a Part,	st executory o not includ py the Part	I Part 2 for creditors with NONPRI contracts on Schedule A/B: Prope e any creditors with partially secur you need, fill it out, number the en that Part. On the top of any addition	erty (Official I red claims tha tries in the bo	Form 106A/ at are listed oxes on the	B) and on I in Schedule left. Attach
		rs have priority unsecu							
1.	•	• •	rea ciaims a	igainst you <i>r</i>					
	No. Go to Pa	irt 2.							
Part 2	∐res. List All o	f Your NONPRIORIT	Y Unsecur	ed Claims					
		rs have nonpriority uns							
	□No. You have	nothing to report in this	part. Submit t	this form to the court with	h vour other:	schedules.			
	Yes.	•	•		,				
	— 1 e3.								
	unsecured clair	n, list the creditor separat	tely for each o	claim. For each claim list	ted, identify v	who holds each claim. If a creditor what type of claim it is. Do not list clait than three nonpriority unsecured claim it is the claim three nonpriority unsecured claim.	ms already in	cluded in Pa	art 1. If more
								Total clain	n
4.1	Bank of A	merica		Last 4 digits of accoun	nt number	4313		\$	1,502.00
	Priority Creditor	32235		When was the debt in	curred?	2002			
	El Paso, T Number Stree	t City State Zlp Code		As of the date you file	, the claim i	s: Check all that apply			
	Who incurred	the debt? Check one.		Contingent					
	Debtor 1 on			Liborangent					
	Debtor 2 on	y		□Unliquidated					
	Debtor 1 an	d Debtor 2 only		Disputed					
		of the debtors and anoth	er	Type of NONPRIORITY	Y unsecured	l claim:			
		s claim is for a commu	inity	☐Student loans					
	debt Is the claim s	ubject to offset?		Dbligations arising ounot report as priority cla		ation agreement or divorce that you o	lid		
	■No					plans, and other similar debts			
	□Yes			Other. Specify	credit	card			
4.2	Capital On	e		Last 4 digits of accour	nt number	0584		\$	2,473.00
1	Priority Creditor PO Box 30 Salt Lake 0	285		When was the debt inc	curred?	2014		Manager (Control of Control of Co	
	Number Chase	City, UT 84130		A	Alea alaim I	Chook all that apply			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Debtor Debtor	1 MICHAEL K SPENCER 2 SANDRA K SPENCER		Case number (if know)		
	Who incurred the debt? Check one.	Contingent	***************************************		
	Debtor 1 only	Libonungent			
	Debtor 2 only	□Jnliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐Student loans			
	debt Is the claim subject to offset?	Filosopa e e e e e			
	is the statin subject to onset:	LDbligations arising out of a sepai not report as priority claims	ation agreement or divorce that you did		
	■No	Debts to pension or profit-sharing	plans, and other similar debts		
	□res	Other. Specify credit	card		
4.3	Capital One / Best Buy	Last 4 digits of account number	0632	\$	3,736.00
	Priority Creditor's Name PO Box 30253	When was the debt incurred?	2006 - 2014		
	Salt Lake City, UT 84130				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only Debtor 2 only	—			
	Libebtol 2 only	☐Unliquidated —			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dibligations arising out of a separ not report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	□Yes	Other. Specify credit	card		
4.4	Capital One / Polaris	Last 4 digits of account number	0110	\$	726.00
	Priority Creditor's Name	•		-	
	PO Box 30252 Salt Lake City, UT 84130	When was the debt incurred?	2005		
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent			
	Debtor 1 only				
	Debtor 2 only	□Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a separa	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	□Yes	Other. Specify credit	card		
4.5	CBSA	Last 4 digits of account number		\$	251.00
	Priority Creditor's Name 123 7th Ave Center	When was the debt incurred?			
	Stillwater, OK 74074 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	y	,			

Schedule E/F: Creditors Who Have Unsecured Claims

ebtor	2 SANDRA K SPENCER		-	Case number (if know)		
	Who incurred the debt? Check one.	Contingent				
	Debtor 1 only					
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	Lat least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:		
	Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	Dbligations arising out not report as priority clair		ration agreement or divorce that you did		
	■No	Debts to pension or pr	ofit-sharing	plans, and other similar debts		
	□Yes	Other. Specify	collect origin ER)	ction nal creditor = Dr. Berry Winn (MRMC		
]	Comenity Bank / Stage	Last 4 digits of account	number	3739	\$	1,531.00
	Priority Creditor's Name PO Box 182789	When was the debt inco	ırred?	1993 - 2014	-	
	Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file,	the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent				
	Debtor 2 only	□Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:		
	Check if this claim is for a community debt	☐Student loans				
	Is the claim subject to offset?	Dbligations arising out not report as priority clain		ation agreement or divorce that you did		
	■No	Debts to pension or pro	ofit-sharing	plans, and other similar debts		
	□Yes	Other. Specify	credit	card	-	
	Cooper Clinic	Last 4 digits of account	number	,	\$	46.00
	Priority Creditor's Name	Ū			-	
	PO Box 17025 Fort Smith, AR 72917	When was the debt incu	rred?	03/2015		
	Number Street City State Zlp Code	As of the date you file, t	he claim i	s: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent				
	Debtor 2 only	□Jnliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐At least one of the debtors and another	Type of NONPRIORITY	unsecured	i claim:		
	Check if this claim is for a community debt	☐Student loans				
	Is the claim subject to offset?	Dbligations arising out on not report as priority claim		ation agreement or divorce that you did		
	■No	Debts to pension or pro	fit-sharing	plans, and other similar debts		
	□Yes	Other. Specify	medic	al services		
	Dr. Berry Winn, PLLC	Last 4 digits of account	number		\$	251.00
7	Priority Creditor's Name	-				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

Debt Debt	or 1 MICHAEL K SPENCER or 2 SANDRA K SPENCER		Case number (if know)		
	PO Box 628 Tahlequah, OK 74465	When was the debt incurred?	2015		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent			
	Debtor 2 only	□Jnliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	□At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	Check if this claim is for a community debt	☐Student loans			
	Is the claim subject to offset?	Dbligations arising out of a sepa	ration agreement or divorce that you did		
	■No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other. Specify medi	cal services		
4.9	John Leaf	Last 4 digits of account number		\$	3,000.00
	Priority Creditor's Name C/O: Bill Orendorf PO Box 129	When was the debt incurred?	2012	***************************************	
	Sallisaw, OK 74955 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent			
	Debtor 2 only	☐Jnliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community debt	☐student loans			
	Is the claim subject to offset?	Dbbligations arising out of a sepa	ration agreement or divorce that you did		
	■No	Debts to pension or profit-sharing	g plans, and other similar debts°		
	□Yes	Other. Specify	uit - business/contractor services	***	
4.10	Macy's	Last 4 digits of account number	4334	\$	1,219.00
	Priority Creditor's Name PO Box 8218	When was the debt incurred?	1993 - 2014		
	Mason, OH 45040 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent			
	Debtor 2 only	□Jnliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐Student loans			
	debt Is the claim subject to offset?	Dibligations arising out of a separ	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	plans, and other similar debts		
	□Yes	Other. Specify credit	card		

Debto Debto	or 1 MICHAEL K SPENCER Or 2 SANDRA K SPENCER			Case number (if know)		
4.11	Sallisaw Lumber Company	Last 4 digits of accou	unt number		\$	9,887.00
	Priority Creditor's Name PO Box 220	When was the debt in	ncurred?	2015		
	Sallisaw, OK 74955 Number Street City State Zlp Code	As of the date you file	e, the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent				
	Debtor 2 only	☐Jnliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐At least one of the debtors and another	Type of NONPRIORIT	Y unsecure	d claim:		
	Check if this claim is for a community debt	☐Student loans				
	Is the claim subject to offset?	Dbligations arising on ot report as priority cla		ration agreement or divorce that you did		
	M _{No}	Debts to pension or	profit-sharing	g plans, and other similar debts		
	□res	Other. Specify	credi	line for lumber supplies		
4.12	Sears Credit Cards	Last 4 digits of accou	int number	9401	\$	2,989.00
L	Priority Creditor's Name PO Box 6283	When was the debt in			***************************************	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file	e, the claim	is: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only	Contingent				
	Debtor 2 only	□Jnliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐At least one of the debtors and another	Type of NONPRIORIT	Y unsecure	d claim:		
	Check if this claim is for a community debt	☐Student loans				
	Is the claim subject to offset?	Dbligations arising on not report as priority class		ation agreement or divorce that you did		
	No	Debts to pension or p	orofit-sharing	plans, and other similar debts		
	□res	Other. Specify	credit	card		
4.13	Sequoyah Memorial Hospital	Last 4 digits of accou	nt number		\$	173.00
	Priority Creditor's Name 213 E. Redwood	When was the debt in	curred?	2015		
	Sallisaw, OK 74955 Number Street City State Zip Code	As of the date you file	, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	Contingent				
	Debtor 1 only Debtor 2 only	☐Jnliquidated				
	■Debtor 1 and Debtor 2 only	Disputed				
	□At least one of the debtors and another	Type of NONPRIORIT	Y unsecure	d claim:		
	Check if this claim is for a community debt	☐Student loans				
	Is the claim subject to offset?	Dbligations arising ou not report as priority cla		ation agreement or divorce that you did		
	■No			plans, and other similar debts		
	□Yes	Other. Specify	medic	al care		

Debtor 2 SANDRA K SPENCER Case number (if know) 4.14 Shell Small Business Card 3,616,00 Last 4 digits of account number \$ Priority Creditor's Name PO Box 6406 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community ☐Student loans debt Is the claim subject to offset? Dbligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts □Yes credit card for gasoline Other, Specify 4.15 **Sparks Regional Medical Center** 254.00 Last 4 digits of account number Priority Creditor's Name 1001 Towson Ave When was the debt incurred? 03/2015 Fort Smith, AR 72901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community Estudent loans debt Is the claim subject to offset? Dbligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts □Yes medical care Other. Specify 4.16 SYNCB / Care Credit 1.049.00 Last 4 digits of account number Priority Creditor's Name PO Box 965036 When was the debt incurred? 2012 - 2014 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: LAt least one of the debtors and another Check if this claim is for a community Estudent loans debt Is the claim subject to offset? Dbligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts No □Yes credit card Other, Specify

Debtor 1 MICHAEL K SPENCER

Debtor 2	1 MICHAEL K 2 SANDRA K			Ca	se number (if know)			
4.17	SYNCB / JC P	enney	Last 4 digits of account nu	umber			\$	4,710.00
	Priority Creditor's N							
	PO Box 96500		When was the debt incurre	ed? 199	1 - 2014			
	Orlando, FL 32 Number Street City		As of the date you file, the	claim is: Ched	ck all that apply			
	Who incurred the o	debt? Check one.	Contingent					
	Debtor 2 only		□Unliquidated					
	Debtor 1 and Deb	otor 2 only	Disputed					
	☐At least one of the	e debtors and another	Type of NONPRIORITY un	secured claim	:			
		m is for a community	☐Student loans					
	ls the claim subjec	t to offset?	Dbligations arising out of a not report as priority claims	a separation ag	reement or divorce that yo	ou did		
	No		Debts to pension or profit-	sharing plans,	and other similar debts			
	□Yes		Other. Specify	credit card			••	
4.18	SYNCB / Lowe	s	Last 4 digits of account nu	ımber			\$	2,209.00
1	Priority Creditor's Na PO Box 96500	5	When was the debt incurre					
	Orlando, FL 32 Number Street City S		As of the date you file, the	claim is: Chec	ck all that apply			
	Who incurred the d	lebt? Check one.	Contingent					
1	Debtor 2 only		□Jnliquidated					
ı	Debtor 1 and Deb	tor 2 only	Disputed					
ı	☐At least one of the	debtors and another	Type of NONPRIORITY uns	secured claim:				
	Check if this clair	m is for a community	☐Student loans					
	s the claim subject	t to offset?	Dbligations arising out of a not report as priority claims	a separation ag	reement or divorce that yo	u did		
ı	No		Debts to pension or profit-	sharing plans, a	and other similar debts			
1	□Yes		Other. Specify	redit card			_	

Part 3:			bt That You Already Listed					
trying to more th	o collect from you f an one creditor for	for a debt you owe to some	bout your bankruptcy, for a det eone else, list the original credi listed in Parts 1 or 2, list the ad	tor in Parts 1	or 2, then list the collecti	on agency her	e. Similarl	y, if you have
Name A	-	o not in out of outside un		1 or Dort?	did you list the orig	inal aradita	-2	
-NONE-			On which entry in Part Line of (Check one):	Part	1: Creditors with Pri 2: Creditors with No	ority Unsecu	red Clai	
			Last 4 digits of accoun					
Part 4:	Add the Amou	nts for Each Type of U	nsecured Claim					
	e amounts of certa cured claim.	in types of unsecured clai	ms. This information is for stati	istical reportin	g purposes only. 28 U.S	.C. §159. Add t	he amoun	ts for each type
					Total claim			
Total ale:		mestic support obligations	3	6a	. \$	0.00	-	
Total clair from Par		ces and certain other debts	s you owe the government	6b.	. \$	0.00		
	6c. Cla	ims for death or personal	injury while you were intoxicate	ed 6c.		0.00	-	
	6d. Oth	ner. Add all other priority uns	ecured claims. Write that amoun	t here. 6d.	. \$	0.00		

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 MICHAEL K SPENCER Debtor 2 SANDRA K SPENCER

Case number (if know)

	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
Total claims	6f.	Student loans	6f.	Total Claim	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,622.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	39,622.00

Fill in this infor	mation to identify your	case:		
Debtor 1	MICHAEL K SPEI	NCER		
	First Name	Middle Name	Last Name	
Debtor 2	SANDRA K SPEN	CER		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	FOKLAHOMA	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Numbe	whom you have the r, Street, City, State and ZIP of	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City	JEANNAL	State	ZIP Code	······································
2.2		**************************************	W. C.	ki Talada ilka i Esta Georgia (balka ki Talada eta ki Esta ki Kalada eta da in sanara da errenda errenda erren	
	Name				
	Number	Street			wasters
	City		State	ZIP Code	
2.3					
	Name		WARRANCE		
	Number	Street			
	City		State	ZIP Code	,
2.4	019		Otale	Zii Oodc	
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5	City	TO THE TOTAL PROPERTY OF A STATE	State	ZIP Code	
	Name				· ·
	Number	Street			
	-011		<u> </u>		
	City		State	ZIP Code	

spendor to spe			生命情况 网络拉拉拉拉拉			
Debtor 1	nis information to	AEL K SPE	and well a residence and a second			
	First Na	me	Middle Name	Last Name	110.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.	
Debtor 2 (Spouse if,		DRA K SPEN	Middle Name	Last Name		
United S	States Bankruptcy	Court for the:	EASTERN DISTRI	CT OF OKLAHOMA		
Case nu	mber					Charle if this is an
	•					☐ Check if this is an amended filing
Offici	al Form 10	6H				
Sche	dule H: Yo	our Cod	ebtors			12/15
eople a ill it out, our nam	re filing together, , and number the ne and case numl	both are equentries in the per (if known)	ally responsible for boxes on the left. A . Answer every ques	supplying correct informati ttach the Additional Page to	on. If more space is a third third third third third third the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
■ No	•	` `		•		
□Ye						
				ity property state or territory o, Puerto Rico, Texas, Washir		ty states and territories include)
	o. Go to line 3. s. Did your spouse	e, former spous	se, or legal equivalen	t live with you at the time?		
in lir Forn	ne 2 again as a co	debtor only i	f that person is a gu	arantor or cosigner. Make s	ure you have listed t	ng with you. List the person shown he creditor on Schedule D (Officia , Schedule E/F, or Schedule G to
	Column 1: Your (Name, Number, Street		P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1					☐Schedule D, line	
	Name				☐Schedule E/F, lir	
			THE THE PARTY OF T		☐Schedule G, line	MARIO DE DESCRIPTO DE DESCRIPTO DE DE CONTRETA DE CONT
	Number Si City	reet	State	ZIP Code		
3.2					□Schedule D, line	•
hd	Name				□Schedule E/F, line	ne
		reet				
	City		State	ZIP Code		

			35. second of South South Co	u do en sobel se la	v 2000-000	•			
	in this information to identify your obtor 1 MICHAEL K								
	btor 2 SANDRA K	The state of the s							
	ouse, if filing)	OI LNOLK							
Un	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF OKLAHOMA						
1	se number		_			Check if this is	:		
(If K	nown)					☐ An amende	-		
			· · · · · · · · · · · · · · · · · · ·					wing postpetitior ne following date	
<u>O</u>	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
Pa	use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment	On the top of any additi	onal pages, write y	our nam	e and	d case number (if	knowr	i more space is i). Answer ever	y question
1.	Fill in your employment information.		Debtor 1			Debtor 2	or no	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	Employed			Emplo	yed		
	information about additional employers.		☐Not employed			□Not em	nployed		
		Occupation	self-employed	- roofer		office n	nanag	er	****
	Include part-time, seasonal, or self-employed work.	Employer's name				Sequoy	ah Co	unty Dist Atty	Office
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed th	nere? <u>20+ ye</u>	ars		2	2 year	'S	
Par	Give Details About Mor	nthly Income				5-40-5-00 · · · · · · · · · · · · · · · · · ·		WITH THE REAL PROPERTY OF THE PERSON OF THE	
spor	mate monthly income as of the dise unless you are separated. u or your non-filing spouse have me							·	
	space, attach a separate sheet to					,			,
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,080.00	\$	3,215.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	1,080.00	\$	3,215.00	

\$ 3,215.00

Debtor 1 MICHAEL K SPENCER Debtor 2 SANDRA K SPENCER

Case number (if known)

				F	or Debtor 1		or Debtor		
	Copy	y line 4 here	4.	\$	1,080.00	\$;3	,215.00	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$;	526.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$		\$;	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$		\$;	25.00	
	5d.	Required repayments of retirement fund loans	5d.	\$		\$;	0.00	
	5e.	Insurance	5e.	\$		\$,	49.00	
	5f.	Domestic support obligations	5f.	\$		\$;	0.00	-
	5g.	Union dues	5g.	\$	***************************************	\$;	0.00	-
	5h.	Other deductions. Specify:	5h.+	- \$		+ \$	i	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$;	600.00	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,080.00	\$	2	,615.00	-
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$		\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		\$	THE PROPERTY OF THE PROPERTY O	0.00	
	8d.	Unemployment compensation	8d.	\$		\$		0.00	-
	8e.	Social Security	8e.	\$		\$		0.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		\$		0.00	-
	8g.	Pension or retirement income	8g.	\$	0.00	\$	***************************************	0.00	
	8h.	Other monthly income. Specify:	_8h.+	\$	0.00	+ \$		0.00	-
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	0. \$		1,080.00 + \$		2,615.00	= \$	3,695.00
	Add ti	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11.	Includ other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. It includes any amounts already included in lines 2-10 or amounts that are not a fig:	depen			•	in <i>Schedu</i> i	le J. +\$	0.00
12.	Add to Write applie	the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines	ult is th n Liab	he d	combined monthly es and Related <i>Dat</i>	nco a, if	me. it 12.	\$	3,695.00
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.						Combir monthly	ned y income
	$\overline{\Box}$	Yes. Explain:							
		· L							

	N 1 2 2 4 4 4 5 2 7 2 2 7 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2		55					
		ation to identify y	our case:					
Deb	otor 1	MICHAEL K	SPENCE	ER			eck if this is:	
1	otor 2 ouse, if filing)	SANDRA K	SPENCE	R			A supplement sho	wing postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the:	EASTE	ERN DISTRICT OF OKLAH	HOMA		MM / DD / YYYY	
1	e number nown)		3	· · · · · · · · · · · · · · · · · · ·				
Of	fficial Fo	rm 106J						
		J: Your						12/15
info	primation. If minber (if know 1: Description Descript	ore space is ne in). Answer ever ibe Your House it case? line 2. s Debtor 2 live in	eded, att ry questic chold n a separ	ate household?	form. On the top of	any add	itional pages, write	or supplying correct your name and case
_				al Form 106J-2, <i>Expenses</i>	ior Separate Houser	iola of De	otor 2.	
2.	•	e dependents?	No					
	Do not list Dand Debtor 2		□Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents							□No □Yes □No □Yes □No □Yes □No □Yes
3.	expenses of	enses include f people other ti I your depender	nan 🗂	No Yes				∐Yes
Esti expe app Incli	mate your ex enses as of a licable date. ude expense	date after the b s paid for with r assistance and	our bankr oankrupto non-cash	ly Expenses uptcy filing date unless y y is filed. If this is a supp government assistance i cluded it on Schedule I: Y	olemental <i>Schedule</i> f you know	rm as a s <i>J</i> , check	supplement in a Cha the box at the top o Your expe	of the form and fill in the
4.		r home ownersl d any rent for the		nses for your residence. I or lot.	nclude first mortgage	4.	\$	1,156.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		ty, homeowner's	, or renter	's insurance		4b.		0.00
	4c. Home	maintenance, re	pair, and ι	upkeep expenses		4c.		100.00
		owner's associati					\$	0.00
5.	Additional m	ortgage payme	nts for yo	our residence, such as ho	me equity loans	5.	\$	564.00

23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	38.00
Do v	ou expect an increase or decrease in your expenses within the year	after you file this		
For ex	ample, do you expect to finish paying for your car loan within the year or do you exp cation to the terms of your mortgage?	ect your mortgage pa	yment to increase	or decrease because of a

Fill in this	s information to identify you	r case:		
Debtor 1	MICHAEL K SPE	NCER		
	First Name	Middle Name	Last Name	
Debtor 2	SANDRA K SPE	NCER		
(Spouse if, fill	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF O	KLAHOMA	
Case num	ber			
(if known)	**************************************			☐ Check if this is an
				amended filing
<u>Official</u>	Form 106Dec			
Decla	ration About a	an Individual D	ebtor's Schedules	12/15
				12.10
f two mari	ried people are filing togeth	er, both are equally responsit	ole for supplying correct information.	
			, 0	
You must f	file this form whenever you	file bankruptcy schedules or	amended schedules. Making a false sta	tement, concealing property, or
	money or property by fraud oth. 18 U.S.C. §§ 152, 1341,		tcy case can result in fines up to \$250,0	100, or imprisonment for up to 20
yeurs, or s	10011. 10 0.0.0. 33 102, 1041,	1010, and 0071.		
	Sign Below			
	<u> </u>	THE	Warner and the second s	
Did v	ou pay or agree to pay som	eone who is NOT an attorney	to help you fill out bankruptcy forms?	
,	ou pay or agree to pay com	oone who is not an accome,	to help you im out buildingtoy forms:	
	No			
	Yes. Name of person		. Attach Bankruptcv Peti	tion Preparer's Notice, Declaration,
	and Signature (Official Form 119).			
11				
	r penalty of perjury, I declare ney are true and correct.	that I have read the summar	y and schedules filed with this declarat	ion and
that th	icy are true and correct.			
	/ MICHAEL K SPENCER		X /s/ SANDRA K SPENCER	
	ICHAEL K SPENCER		SANDRA K SPENCER	
Si	ignature of Debtor 1		Signature of Debtor 2	
D	ate December 3, 2015		Date December 3, 2015	
D.	December 3, 2015		Date December 3, 2015	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

	Strifte Mills and The Levil	The state of the s	Las en gran de la companya del companya de la companya de la companya del companya de la company						
Fil	l in this infor	nation to identify yo	ur case:						
Debtor 1		MICHAEL K SPENCER							
De	btor 2	First Name SANDRA K SPE	Middle Name	Last Name					
1	ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Ba	nkruptcy Court for the	: EASTERN DISTRICT O	F OKLAHOMA					
t	se number								
(if k	nown)					Check if this is an amended filing			
1	The state of the s					amended ming			
Of	ficial Fo	rm 107							
			Affairs for Indivi	duals Filing for B	ankruptcy	12/15			
				-	e equally responsible for su				
info	rmation. If m	ore space is needed n). Answer every que	, attach a separate sheet to	this form. On the top of a	ny additional pages, write y	our name and case			
			arital Status and Where Yo	u Lived Defens					
				u Lived Before					
1.	wnat is you	current marital stat	us?						
	■ Married □ Not mar	ried							
2.	During the la	he last 3 years, have you lived anywhere other than where you live now?							
	■ No								
	☐ Yes. Lis	t all of the places you	lived in the last 3 years. Do r	not include where you live no	w.				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ddress:	Dates Debtor 2 lived there			
3. state	Within the la	st 8 years, did you e es include Arizona, Ca	ver live with a spouse or le alifornia, Idaho, Louisiana, Ne	gal equivalent in a commu evada, New Mexico, Puerto F	nity property state or territo Rico, Texas, Washington and	ry? (Community property Wisconsin.)			
	■ No								
		ke sure you fill out Sc	hedule H: Your Codebtors (C	Official Form 106H).					
Par	t 2 Evolai:	n the Sources of You	ır İncome						
l.	Fill in the tota	I amount of income yo	nployment or from operation received from all jobs and have income that you receive	all businesses, including par		endar years?			
	□ No								
		in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
From January 1 of current year until			☐Wages, commissions,	\$6,460.00	☐Wages, commissions,	\$37,269.00			
the	date you filed	I for bankruptcy:	bonuses, tips		bonuses, tips				
			Operating a business		☐Operating a business				

Official Form 107

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a	
For last cald	endar year: to Decembe	r 31, 2014)	☐Wages, commissions, bonuses, tips	\$2,330.00	□Wages, combonuses, tips	missions, \$40,637.00
			Operating a business		□Operating a t	pusiness
For the cale (January 1 t			□Wages, commissions, bonuses, tips	\$871.00	□Wages, composition	missions, \$40,243.00
			Operating a business		□Operating a t	pusiness
Include i unemplo gamblino	income regar syment, and o g and lottery	dless of whet other public b winnings. If y	ne during this year or the two ther that income is taxable. Ex enefit payments; pensions; rer ou are filing a joint case and you come from each source separa	amples of other income are and income; interest; dividen ou have income that you rec	alimony; child sup ds; money collect eived together, lis	ed from lawsuits; royalties; and t it only once under Debtor 1.
☐ Yes	s. Fill in the d	letails.				
			Debtor 1 Sources of income Describe below	Gross income (before deductions and exclusions)	Debtor 2 Sources of inc Describe below	
Part 3: Li	st Certain P	ayments You	Made Before You Filed for	Bankruptcy		
6. Are eithe ☐ No.	Neither D	ebtor 1 nor l	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househol	ımer debts. Consumer debt	s are defined in 11	U.S.C. § 101(8) as "incurred by an
		e 90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a tota	of \$6,225* or mo	оте?
	□ No.	Go to line				
	☐ Yes * Subject	paid that con not include	each creditor to whom you pai reditor. Do not include paymen payments to an attorney for th ton 4/01/16 and every 3 years	nts for domestic support obliq his bankruptcy case.	gations, such as c	yments and the total amount you hild support and alimony. Also, do of adjustment.
Yes	. Debtor 1	or Debtor 2 o	or both have primarily consu	ımer debts.		
	No.	Go to line 7	7.			
	□ Yes	include pay	each creditor to whom you pai /ments for domestic support ol / for this bankruptcy case.			you paid that creditor. Do not Also, do not include payments to
Credito	r's Name an	d Address	Dates of paymer	nt Total amount paid	Amount you still owe	Was this payment for
Insiders i corporation including	include your i	relatives; any you are an o	r bankruptcy, did you make a general partners; relatives of fficer, director, person in contro perate as a sole proprietor. 11	any general partners; partne ol, or owner of 20% or more	rships of which yo of their voting sec	was an insider? ou are a general partner; urities; and any managing agent, support obligations, such as child
■ No □ Yes	. List all payr	nents to an ir	nsider			
Insider's	s Name and	Address	Dates of paymer	nt Total amount paid	Amount you still owe	Reason for this payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	ebtor 1 MICHAEL K SPENCER ebtor 2 SANDRA K SPENCER		Case	e number (if known)	***************************************	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a debt t	hat benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor's	
Pa	art 4: Identify Legal Actions, Repossession	ns, and Foreclosures	·			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in ar cases, small claims action	y lawsuit, court act is, divorces, collection	ion, or administr n suits, paternity a	rative proceeding? actions, support or	? custody
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the cas	se
	John Leaf		Sequoyah coun	ty	Pending	
	-v- Mike Spencer		Sallisaw, OK		☐On appeal	
	CS-2012-237				☐ Concluded	
					construction d	lispute
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below No Yes. Fill in the information below.	cy, was any of your prope v.	erty repossessed, fo	reclosed, garnis	hed, attached, sei	zed, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	I			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details.	otcy, did any creditor, incl ause you owed a debt?	luding a bank or fina	ancial institution	, set off any amou	ints from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	ection was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possessio	on of an assigned	e for the benefit of	f creditors, a
	■ No □ Yes					
Par	rt 5: List Certain Gifts and Contributions					
	Within 2 years before you filed for bankrup	tcy, did you give any gifts	with a total value o	of more than \$60	0 per person?	
	No Yes. Fill in the details for each gift.		v			
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the git	you gave	Value
	Person to Whom You Gave the Gift and Address:			ano gri		

	ebtor 1 MICHAEL K SPENCER SANDRA K SPENCER		Case number (if known)	
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or	cruptcy, did you give any gifts or contribution	ons with a total value of more tha	n \$600 to any charity
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankr disaster, or gambling?	uptcy or since you filed for bankruptcy, did	you lose anything because of the	eft, fire, other
	No No			
	☐ Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the Include the amount that insurance has paid. pending insurance claims on line 33 of Sche	List loss	Value of property lost
		Property.		
Pa	rt 7: List Certain Payments or Transfe	rs	WANTED TO THE TOTAL CONTROL OF THE TOTAL CONTROL OT THE TOTAL CONTROL OF THE TOTAL CONTROL OT THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OT	
16.	consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on you preparing a bankruptcy petition? preparers, or credit counseling agencies for se		
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value of any prop transferred	perty Date payment or transfer was made	Amount of payment
	Wright, Stout & Wilburn 300 W. Broadway Muskogee, OK 74401	attorney services	11/2015	\$1,250.00
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer tha	uptcy, did you or anyone else acting on you ditors or to make payments to your credito at you listed on line 16.	ur behalf pay or transfer any propors?	erty to anyone who
	■ No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any prop transferred	perty Date payment or transfer was made	Amount of payment
18.	transferred in the ordinary course of you	s made as security (such as the granting of a		
	☐ Yes. Fill in the details.			
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you		•	

	ebtor 1 MICHAEL K SPENCER SANDRA K SPENCER			Case n	umber (if known)	MANUSCO
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p. No ☐ Yes. Fill in the details.		any property to	o a self-set	tled trust or similar devic	e of which you are a
	Name of trust	Description and	d value of the p	roperty tra	nsferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, In	nstruments, Safe Depo	sit Boxes, and	Storage U	nits	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	ounts; certifica	tes of depo	•	•
	Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accinstrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed t	or bankruptcy,	any safe o	leposit box or other depo	ository for securities,
	□ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code)		Describ	e the contents	Do you still have it?
	armstrong bank			import	ant documents	⊡No ■Yes
22.	Have you stored property in a storage unit	or place other than yo	ur home within	1 year be	fore you filed for bankrup	otcy
	No					
	☐ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number, State and ZIP Code)		Describ	e the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	I for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Ind	clude any prop	erty you bo	orrowed from, are storing	for, or hold in trust
	No Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describ	e the property	Value
Par	t 10: Give Details About Environmental Inf	formation				
For	the purpose of Part 10, the following definiti	ions apply:				
	· · ·					
2	Environmental law means any federal, state	e, or local statute or re	gulation conce	rning poll	ution, contamination, rele	eases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Debtor 1	MICHAEL I	K:	SP	EN	CER
Debtor 2	SANDRA K	S	P	EN	CER

Case number (if known)

24.	Has	s any governmental unit notified you tha	t you may be liable or potentially liable u	nder or in violation of an enviror	nmental law?
		No			
		Yes. Fill in the details.			
		nme of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?		
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Hav	ve you been a party in any judicial or adr	ninistrative proceeding under any enviro	nmental law? Include settlemen	ts and orders.
	1	No			
		Yes. Fill in the details.			
		se Title se Number	Court or agency N Name Address (Number, Street, City, State and ZIP Code)	ature of the case	Status of the case
Pai	111:	Give Details About Your Business or	·		
			- T	of the following connections to	any husiness?
		hin 4 years before you filed for bankrupt	cy, did you own a business or have any		any business?
		hin 4 years before you filed for bankrupt	cy, did you own a business or have any o a trade, profession, or other activity, eitl	ner full-time or part-time	any business?
		hin 4 years before you filed for bankrupt ☐A sole proprietor or self-employed in ☐A member of a limited liability compa	cy, did you own a business or have any	ner full-time or part-time	any business?
		hin 4 years before you filed for bankrupt □A sole proprietor or self-employed in □A member of a limited liability compa □A partner in a partnership	cy, did you own a business or have any o a trade, profession, or other activity, eith	ner full-time or part-time	any business?
		hin 4 years before you filed for bankrupt □A sole proprietor or self-employed in □A member of a limited liability compa □A partner in a partnership □An officer, director, or managing exe	cy, did you own a business or have any of a trade, profession, or other activity, eith any (LLC) or limited liability partnership (limited liability partnership (limited liability partnership)	ner full-time or part-time	any business?
	Witi	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting	cy, did you own a business or have any of a trade, profession, or other activity, eithout (LLC) or limited liability partnership (cutive of a corporation or equity securities of a corporation	ner full-time or part-time	any business?
	Witl	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F	cy, did you own a business or have any or a trade, profession, or other activity, eithout (LLC) or limited liability partnership (Cutive of a corporation or equity securities of a corporation Part 12.	ner full-time or part-time	any business?
	With	hin 4 years before you filed for bankrupt \[\sum_A \text{ sole proprietor or self-employed in } \] \[\sum_A \text{ member of a limited liability compain } \] \[\sum_A \text{ partner in a partnership } \] \[\sum_A \text{ of ficer, director, or managing exe } \] \[\sum_A \text{ owner of at least 5% of the voting } \] \[No. None of the above applies. Go to Formula of the second fillows and fillows are supplied to the fillows and fillows are supplied to the fillows and fillows are supplied to the fillows are sup	cy, did you own a business or have any of a trade, profession, or other activity, eithout (LLC) or limited liability partnership (Cutive of a corporation or equity securities of a corporation Part 12.	her full-time or part-time LLP)	
	With	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F Yes. Check all that apply above and fill siness Name dress	cy, did you own a business or have any or a trade, profession, or other activity, either activity or limited liability partnership (for equity securities of a corporation or equity securities of a corporation or the details below for each business. Describe the nature of the business	ner full-time or part-time	per
	With	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F Yes. Check all that apply above and fill siness Name	cy, did you own a business or have any of a trade, profession, or other activity, eithout (LLC) or limited liability partnership (Cutive of a corporation or equity securities of a corporation Part 12.	her full-time or part-time LLP) Employer Identification numb	per
27.	With Bus Add (Nur	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F Yes. Check all that apply above and fill siness Name dress mber, Street, City, State and ZIP Code)	cy, did you own a business or have any or a trade, profession, or other activity, either activity or limited liability partnership (for equity securities of a corporation or equity securities of a corporation or the details below for each business. Describe the nature of the business	her full-time or part-time LLP) Employer Identification number the properties of t	per y number or ITIN.
27.	With Bus Add (Nur	hin 4 years before you filed for bankrupt \[\textstyle \textstyle \text{ Sole proprietor or self-employed in } \[\textstyle \text{ A member of a limited liability compains } \[\textstyle \text{ A partner in a partnership } \[\textstyle \text{ An officer, director, or managing exe } \[\text{ An owner of at least 5% of the voting } \] No. None of the above applies. Go to Figure 4. The second of the s	cy, did you own a business or have any of a trade, profession, or other activity, either activity or limited liability partnership (for equity securities of a corporation part 12. In the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	her full-time or part-time LLP) Employer Identification number the properties of t	per y number or ITIN.
27.	Bus Add (Nur	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F Yes. Check all that apply above and fill siness Name dress nber, Street, City, State and ZIP Code) nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you own a business or have any of a trade, profession, or other activity, either activity or limited liability partnership (for equity securities of a corporation part 12. In the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	her full-time or part-time LLP) Employer Identification number the properties of t	per y number or ITIN.
27.	Bus Add (Nur With insti	hin 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability compa A partner in a partnership An officer, director, or managing exe An owner of at least 5% of the voting No. None of the above applies. Go to F Yes. Check all that apply above and fill siness Name dress of the companion of the self-exemptor of the companion	cy, did you own a business or have any of a trade, profession, or other activity, either activity or limited liability partnership (for equity securities of a corporation part 12. In the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	her full-time or part-time LLP) Employer Identification number the properties of t	per y number or ITIN.

Debtor 1	MICHAEL K SPENCER		
Debtor 2	SANDRA K SPENCER		Case number (if known)
Part 12:	Sign Below		
are true a	nd correct. I understand that maki	ng a false statement	and any attachments, and I declare under penalty of perjury that the answers t, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ MICH	AEL K SPENCER	Isl SA	ANDRA K SPENCER
MICHAE	L K SPENCER	SAND	DRA K SPENCER
Signature	e of Debtor 1	Signat	ture of Debtor 2
Date D	ecember 3, 2015	Date	December 3, 2015
Did you at ⊡No ⊡Yes	tach additional pages to Your Sta	tement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pa ⊡No	ay or agree to pay someone who is	s not an attorney to	help you fill out bankruptcy forms?
□Yes. Nar	ne of Person	Attach the <i>Bar</i>	nkruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1	MICHAEL K SPENCER		
Debtor 2	SANDRA K SPENCER	Case number (if known)	

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	December 3, 2015	Signature	/s/ MICHAEL K SPENCER	
			MICHAEL K SPENCER	
			Debtor	
Date	December 3, 2015	Signature	Is/ SANDRA K SPENCER	
			SANDRA K SPENCER	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Fill in this infor	rmation to identify your	case:		
Debtor 1	MICHAEL K SPEI	NCER		
	First Name	Middle Name	Last Name	
Debtor 2	SANDRA K SPEN	CER		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F OKLAHOMA	
Case number (if known)				☐ Check if this is an
****				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule information below.	D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Armstrong Bank name:	☐Surrender the property. ☐ Retain the property and redeem it.	□No
Description of 2001 Dodge 3500 pickup property securing debt:	■Retain the property and enter into a Reaffirmation Agreement. □Retain the property and [explain]:	■Yes
Creditor's Armstrong Bank name:	☐Surrender the property. ☐ Retain the property and redeem it.	□No
Description of 2002 Chevrolet 1500 pickup property securing debt:	■Retain the property and enter into a *Reaffirmation Agreement.* □Retain the property and [explain]:	■Yes
Creditor's Armstrong Bank name:	☐Surrender the property. ☐Retain the property and redeem it.	□No
Description of property not running, needs radiator securing debt:	■Retain the property and enter into a Reaffirmation Agreement. □Retain the property and [explain]:	■Yes

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

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page 1

Best Case Bankruptcy

B8 (Form 8) (12/08) Page 2

name:	☐Surrender the property.☐Retain the property and redeem it.	□No
Description of 1996 John Deere 1070 tractor	Retain the property and redeem it. Reaffirmation Agreement.	■Yes
property securing debt:	Retain the property and [explain]:	MANAGE PROTES
Creditor's Chase Home Mortgage name:	☐Surrender the property. ☐ Retain the property and redeem it.	□No
Description of property SEQUOYAH COUNTY County securing debt:	■Retain the property and enter into a Reaffirmation Agreement. □Retain the property and [explain]:	■Yes
Creditor's DiTech Financial LLC name:	☐Surrender the property. ☐ Retain the property and redeem it.	□No
Description of property SEQUOYAH COUNTY County securing debt:	■Retain the property and enter into a Reaffirmation Agreement. □Retain the property and [explain]:	Yes
Describe your unexpired personal property leases		vviii the lease he assilmen?
l essor's name:		Will the lease be assumed?
Lessor's name: Description of leased Property:		□No □Yes
Description of leased		□No
Description of leased Property:		□No □Yes
Description of leased Property: Lessor's name: Description of leased Property: Lessor's name:		□No □Yes □No
Description of leased Property: Lessor's name: Description of leased Property:		□No □Yes □No □Yes
Description of leased Property: Lessor's name: Description of leased Property: Lessor's name: Description of leased Property: Lessor's name: Lessor's name:		□No □Yes □No □Yes □No
Description of leased Property: Lessor's name: Description of leased Property: Lessor's name: Description of leased Property:		□No □Yes □No □Yes □No □Yes
Description of leased Property: Lessor's name: Lessor's name: Description of leased Property:		□No □Yes □No □Yes □No □Yes □No □Yes
Description of leased Property: Lessor's name: Description of leased Property: Lessor's name: Description of leased Property: Lessor's name: Description of leased Property:		□ No □ Yes
Description of leased Property: Lessor's name: Description of leased Property:		□ No □ Yes □ No
Description of leased Property: Lessor's name: Lessor's name: Description of leased Property: Lessor's name: Lessor's name:		☐ No ☐ Yes
Description of leased Property: Lessor's name: Description of leased		□ No □ Yes □ No

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Official Form 108

Best Case Bankruptcy

page 2

Statement of Intention for Individuals Filing Under Chapter 7

B8 (Form 8) (12/08)
Description of leased
Property:

□Yes

Page 3	5
--------	---

Part 3:	Sign	Below
---------	------	-------

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ MICHAEL K SPENCER MICHAEL K SPENCER

Signature of Debtor 1

Date December 3, 2015 X /s/ SANDRA K SPENCER

SANDRA K SPENCER Signature of Debtor 2

Date December 3, 2015

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 3

Fill	in this information to identify your case:					is dire	ected in this form and	d in
Det	otor 1 MICHAEL K SPENCER		Fo	irm 12	22A-1Supp:			
Dak					contractor where the contractor c	***************************************		
1	otor 2 SANDRA K SPENCER ouse, if filing)							
l tai	tod States Berliminter Count for the . Frater Bistrict of	Chilahama	-	3 1. 7	There is no pres	sumpti	on of abuse	
Cas	ted States Bankruptcy Court for the: Eastern District of se number	Oklanoma				made i	ermine if a presumptior under <i>Chapter 7 Means</i>	
(if k	nown)				•		not apply now because	n of
							ce but it could apply la	
~ .	c			□ Ch	eck if this is a	an am	ended filing	
	ficial Form 122A - 1		_					
Ch	napter 7 Statement of Your Cui	rrent Monthl	y Inc	om	е			12/1
spac addi you	us complete and accurate as possible. If two married ce is needed, attach a separate sheet to this form. In the itional pages, write your name and case number (if k do not have primarily consumer debts or because of sumption of Abuse Under § 707(b)(2) (Official Form 1.) Calculate Your Current Monthly Income	clude the line numbe nown). If you believe f qualifying military s	r to which that you ervice, o	ch the	additional inf exempted from	ormat a pre	ion applies. On the to sumption of abuse b	p of any ecause
1.	What is your marital and filing status? Check one or	nly.					Annibation	
	☐ Not married. Fill out Column A, lines 2-11.	•						
	Married and your spouse is filing with you. Fill o	ut both Columns A and	d B, lines	2-11.				
	☐ Married and your spouse is NOT filing with you.							
	☐ Living in the same household and are not leg	•		olumns	A and B, lines	2-11.		
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are I living apart for reasons that do not include evading the average monthly income that you received the second s	egally separated unde ng the Means Test req from all sources, der	r nonbar uirement ived dur	krupto ts. 11 l ing th	cy law that appl J.S.C § 707(b) e 6 full month	ies or i (7)(B). s befo	that you and your spou	se are
o ir	ase. 11 U.S.C. § 101(10A). For example, if you are filing f your monthly income varied during the 6 months, add to acome amount more than once. For example, if both spotyou have nothing to report for any line, write \$0 in the spotyou have nothing to report for any line.	he income for all 6 mo uses own the same re	nths and	l divide	e the total by 6.	Fill in	the result. Do not inclu	de any
				Colui Debt		Deb	<i>umn B</i> itor 2 or -filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).	and commissions (b	efore	\$	1,076.67	\$	3,215.00	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a spor	use if	\$	0.00	\$_	0.00	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular contri d, your dependents, pa	butions arents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,							
	Orange and the form all defections	Debtor 1 \$ 0.00						
	Gross receipts (before all deductions)	-\$ 0.00						
	Ordinary and necessary operating expenses Net monthly income from a business, profession, or far	2.20	here ->	\$	0.00	\$	0.00	
6	Net income from rental and other real property							
•	four property	Debtor 1						
	Gross receipts (before all deductions)	\$0.00_						
	Ordinary and necessary operating expenses	-\$ 0.00						
	Net monthly income from rental or other real property	\$ 0.00 Copy	here ->	\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

0.00

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amounder the Social Security Act. Instead, list it here:		efit	ALL CONTROL FOR MANAGEMENT				
	For you	\$	0.00					
	For your spouse	\$(0.00					
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act.	amount received that v	vas a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against h domestic terrorism. If necessary, list other sources or total below.	Security Act or payme umanity, or internation	ents al or					
				\$	0.00	\$	0.00	
	44-141-14 (12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add leach column. Then add the total for Column A to the		\$	1,076.67	+ \$	3,215.00	= s	4,291.67
Part	2: Determine Whether the Means Test Applies	to You					Total c	urrent monthly
* :								
12.	Calculate your current monthly income for the yea	•						
	12a. Copy your total current monthly income from line	11	***************	Сор	y line 11	here=>	\$	4,291.67
	Multiply by 12 (the number of months in a year)						x 1	2
	12b. The result is your annual income for this part of t	he form				125). \$ \$	1,500.04
13.	Calculate the median family income that applies to	you. Follow these ste	eps:				L	**************************************
	Fill in the state in which you live.	ок						
	,							
	Fill in the number of people in your household.	2					,	
	Fill in the median family income for your state and size	**********			*************	13.	\$\$	4,857.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban		specified	I in the sepa	rate instru	ctions		
14.	How do the lines compare?							
	Line 12b is less than or equal to line 13. (Go to Part 3.	On the top of page 1, o	check bo	x 1, There is	no presur	nption of abu	se.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pi	resumption o	f abuse is	determined t	by Form 1.	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	y that the information	on this st	atement and	l in any at	achments is	true and c	orrect.
	X /s/ MICHAEL K SPENCER	Х	/s/ SAN	DRA K SP	ENCER			
	MICHAEL K SPENCER			A K SPEN				
	Signature of Debtor 1		Signatur	e of Debtor 2	2			
	Date December 3, 2015 MM / DD / YYYY			ber 3, 201 / YYYY	5			
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

MICHAEL K SPENCER Debtor 1 Debtor 2

SANDRA K SPENCER Case number (if known) Debtor 1 Debtor 2

MICHAEL K SPENCER SANDRA K SPENCER

		e number (if known)	Case
--	--	---------------------	------

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2015 to 11/30/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: ROOFING / CONSTRUCTION

Income by Month:

6 Months Ago:	06/2015	\$0.00
5 Months Ago:	07/2015	\$1,000.00
4 Months Ago:	08/2015	\$5,460.00
3 Months Ago:	09/2015	\$0.00
2 Months Ago:	10/2015	\$0.00
Last Month:	11/2015	\$0.00
	Average per month:	\$1,076.67

Debtor 1
Debtor 2

MICHAEL K SPENCER SANDRA K SPENCER

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 06/01/2015 to 11/30/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment - DA's Office

Income by Month:

6 Months Ago:	06/2015	\$3,215.00
5 Months Ago:	07/2015	\$3,215.00
4 Months Ago:	08/2015	\$3,215.00
3 Months Ago:	09/2015	\$3,215.00
2 Months Ago:	10/2015	\$3,215.00
Last Month:	11/2015	\$3,215.00
	Average per month:	\$3,215.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Desc Main

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+ \$235 filing fee + \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Oklahoma

In re	MICHAEL K SPENCER SANDRA K SPENCER		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,250.00
	Prior to the filing of this statement I have receive			1,250.00
				0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
. Т	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
	■ I have not agreed to share the above-disclosed co	mpensation with any other person	unless they are mem	bers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:
b. с.	 Analysis of the debtor's financial situation, and reference in the preparation and filing of any petition, schedules, so the Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the provision of the provisi	statement of affairs and plan which ditors and confirmation hearing, an o reduce to market value; exe tions as needed; preparation	may be required; d any adjourned hea emption planning;	rings thereof;
. В	y agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of nkruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
De	ecember 3, 2015	/s/ Justin Stout		
Da	te	Justin Stout 1958		
		Signature of Attorney Wright, Stout & W		
		300 West Broadw		
		Muskogee, OK 74		
		(918) 682-0091 Fa	ax: (918) 683-6340)
		Justin@wswlaw.d	om	
		Name of law firm		

United States Bankruptcy Court Eastern District of Oklahoma

In re	SANDRA K SPENCER		Case No.	
		Debtor(s)	Chapter	7
	VERIFIC	CATION OF CREDITOR	MATRIX	
The abo	ove-named Debtors hereby verify that the	ne attached list of creditors is true and co	orrect to the best of	of their knowledge.
Date:	December 3, 2015	/s/ MICHAEL K SPENCER		
		MICHAEL K SPENCER		
		Signature of Debtor		
Date:	December 3, 2015	/s/ SANDRA K SPENCER		
		SANDRA K SPENCER		
		Signature of Debtor		

Armstrong Bank 1111 W. Broadway Muskogee, OK 74403

Bank of America PO Box 982235 El Paso, TX 79998

Capital One PO Box 30285 Salt Lake City, UT 84130

Capital One / Best Buy PO Box 30253 Salt Lake City, UT 84130

Capital One / Polaris PO Box 30252 Salt Lake City, UT 84130

CBSA 123 7th Ave Center Stillwater, OK 74074

Chase Home Mortgage PO Box 24696 Columbus, OH 43224

Comenity Bank / Stage PO Box 182789 Columbus, OH 43218

Cooper Clinic PO Box 17025 Fort Smith, AR 72917

DiTech Financial LLC 345 Saint Peter St Saint Paul, MN 55102

Dr. Berry Winn, PLLC PO Box 628 Tahlequah, OK 74465

John Leaf C/O: Bill Orendorf PO Box 129 Sallisaw, OK 74955

Macy's PO Box 8218 Mason, OH 45040 Sallisaw Lumber Company PO Box 220 Sallisaw, OK 74955

Sears Credit Cards PO Box 6283 Sioux Falls, SD 57117

Sequoyah Memorial Hospital 213 E. Redwood Sallisaw, OK 74955

Shell Small Business Card PO Box 6406 Sioux Falls, SD 57117

Sparks Regional Medical Center 1001 Towson Ave Fort Smith, AR 72901

SYNCB / Care Credit PO Box 965036 Orlando, FL 32896

SYNCB / JC Penney PO Box 965007 Orlando, FL 32896

SYNCB / Lowes PO Box 965005 Orlando, FL 32896

United States Bankruptcy Court **Eastern District of Oklahoma**

In re	SANDRA K SPENCER		Case No.	
•		Debtor(s)	Chapter	7
		ATION RE: ELECTRONIC FILL ION, SCHEDULES & STATEM		
PART	I - DECLARATION OF PETITIONER			
stateme to the U Clerk o electror	I [We] MICHAEL K SPENCER and of perjury that the information I have given ints, and schedules is true and correct. I constituted States Bankruptcy Court. I understandince all schedules have been filed electronical field. I understand that failure to file further notice.	n my attorney and the information sent to my attorney sending my per d that this DECLARATION RE: E ally but, in no event, no later than	provided in the ele tition, this declarate ELECTRONIC FIL 15 days following to	ctronically filed petition, ion, statements and schedules ING is to be filed with the the date the petition was
	[If petitioner is an individual who chapter 7, 11, 12 (when available) or 13 o chapter. I request relief in accordance with read and signed a completed Form B21 St correct.	n the chapter specified in this petit	understand the relie	ef available under each such penalty of perjury that I have
	☐ [If petitioner is a corporation or petition is true and correct, and that I have	partnership] I declare under penalt		

December 3, 2015 Dated:

Signed:

Applicant

SANDRA K SPENCER

Joint Applicant

[If petitioner files an application to pay filing fees in installments] I certify that I completed an application to pay the

filing fee in installments. I am aware that if the fee is not paid within 120 days of the filing date of filing the petition, the

bankruptcy case may be dismissed and, if dismissed, I may not receive a discharge of my debts.

PART II - DECLARATION OF ATTORNEY:

relief in accordance with the chapter specified in this petition.

I declare under penalty of perjury that I have reviewed the above debtor's petition and that the information is complete and correct to the best of my knowledge. The debtor(s) will have signed this form before I submit the petition, schedules, and statements. I will give the debtor(s) a copy of all forms and information to be filed with the United States Bankruptcy Court. I further declare that I have examined the above debtor's petition, schedules, and statements and, to the best of my knowledge and belief, they are true, correct, and complete. If an individual, I further declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 (when available) or 13 of Title 11, United States Code, and have explained the relief available under each such chapter. If an individual, I further declare that the debtor(s) have read and signed a completed Form B21 Statement of Social Security Number, and that I shall retain the form for a period of one (1) year following the closing of the case. This declaration is based on all information of which I have knowledge.

Dated:

December 3, 2015

Signed:

Attorney for Debtor(s)